

Type of Inspection

New ☐ _____
 Annual ☒ _____
 Follow-Up ☐ _____
 (Prev. Inspection Date)
 Complaint ☐ _____
 Courtesy ☐ _____
 Random ☐ _____

NCDA&CS, VETERINARY DIVISION
 ANIMAL WELFARE SECTION
 1030 MAIL SERVICE CENTER,
 RALEIGH, NC 27699-1030
 PHONE: 919/715-7111, FAX: 919/733-6431

INDOOR ☒
 OUTDOOR ☐
 BOTH ☐

ENTERED

ANIMAL WELFARE INSPECTION

GPS Coordinates - N: 36.00147

W: 80.44634

LICENSE #: 10754

TYPE FACILITY: Animal Shelter (Private/Public) ☐ Boarding Kennel ☒ Pet Shop ☐ Public Auction ☐

BUSINESS NAME: CRITTERS PET RESORT

OWNER: _____

ADDRESS: 166 WEBB WAY

TELEPHONE: (336) 940-5773

VMO HUNTER

COUNTY DAVIE

Number of Primary Enclosures 22

Animals Present: Dogs 14

Cats 1

Inspector: Mark "X" in each box, if adequate.
 Circle each item number, if inadequate.
 Use NA if not applicable

STRUCTURE**Housing Facilities**

- ☒ 1. Structure & Repair
☒ 2. Ventilation & Temp.
☒ 3. Lighting
☒ 4. Ceiling, Wall, Floors
☒ 5. Storage
☒ 6. Water Drainage

Primary Enclosures

- ☐ 7. Structure & Repair
☒ 8. Space
☒ 9. Ventilation & Temp.
☒ 10. Adequate Shelter

SANITATION

- ☒ 11. Waste Disposal
☒ 12. Odor
☒ 13. Ceiling, Wall, Floors
☒ 14. Primary Enclosures
☒ 15. Equipment & Supplies
☒ 16. Washrooms, Sinks, Basins
☒ 17. Insect/Vermin Control
☒ 18. Building & Grounds

HUSBANDRY

- ☒ 19. Adequate Feed/Water
☒ 20. Food Storage
☒ 21. Personnel
☒ 22. Ratio of 1:10 personnel to animals if >4 in primary enclosure or common area
☒ 23. Animals' Appearance

SPECIAL ITEMS**Records**

- ☒ 24. Description of Animals
☒ 25. Records/Vet Treatment
☒ 26. Origin/Disposition
☒ 27. Signature (boarding kennel)
☒ 28. Written permission from owner for commingling (doggie daycare)

Transportation

- ☒ 29. Care in Transit Discussed

Veterinary Care

- ☒ 30. Isolation Facility
☒ 31. No Signs of Illness/Treated

☒ APPROVED

☐ CONDITIONALLY APPROVED ☐ DISAPPROVED

Date: 7/8/08 Time: 16:04

Inspector's Signature

Owner/Authorized Agent's Signature

ANIMAL WELFARE INSPECTION CONTINUATION PAGE

TELEPHONE: (336) 940-5773

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